

Setting up your account in



Provider's Quick Guide

Introduction:

What is TRAIN?

TRAIN is the nation's premier learning resource for professionals who protect the public health. TRAIN is comprised of the national www.train.org site and participating TRAIN affiliate sites. Affiliate sites are managed by many state public health agencies, academic partners, and others. When completed, TRAIN will serve the majority of the U.S. public health workforce.

Learners can use TRAIN to:

- Search or browse the nationwide database for on-site or distance learning courses
- Sign up for e-mails about new courses
- Create a personal learning record of competency-based training
- Provide and view feedback about courses listed on the site
- Register online for many courses

The VDH Office of EMS has chosen TRAINVirginia as the platform we will use to enable Virginia EMS providers to register and take online CE programs for CE credit.

Learning Objectives:

Learn how to:

- ✓ log onto the **TRAIN**Virginia website
- ✓ locate "*Create Account*" section
- ✓ complete new account creation process

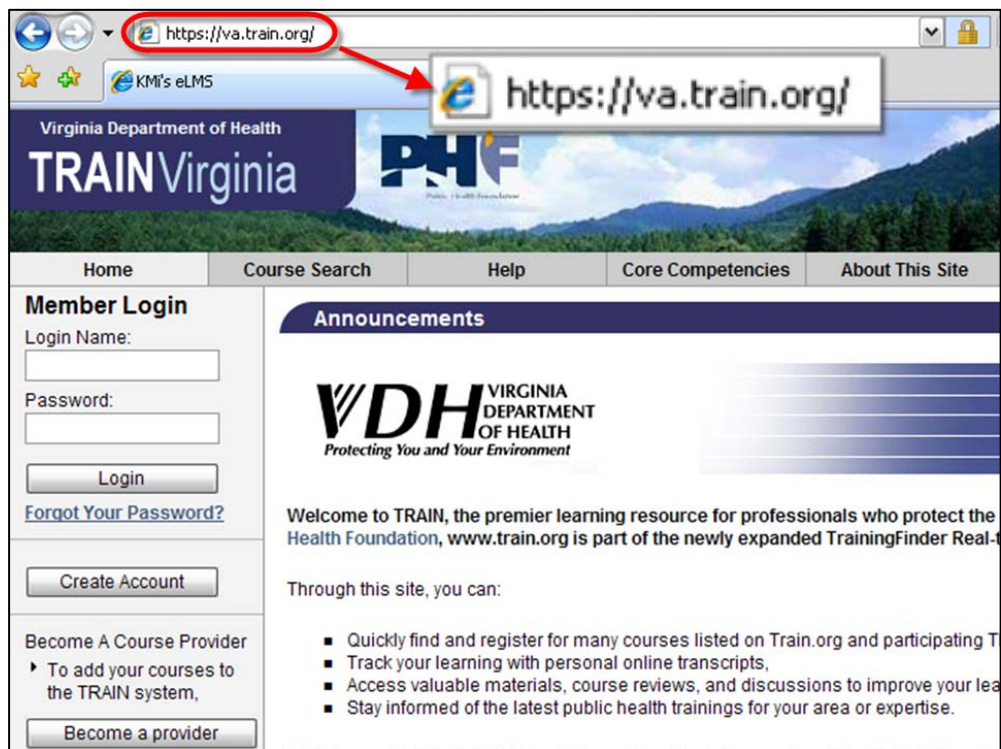


Browser Requirements	Operating Systems Supported
WINDOWS	WINDOWS
▪ Internet Explorer 5.5 +	▪ Windows Vista
▪ Netscape 7.1 +	▪ Windows XP
	▪ Windows 2000
MACINTOSH	MACINTOSH
▪ Mozilla FireFox 1.3 +	▪ OS X 10.2 or greater

Step 1

Locating the TRAINVirginia web page

1. Open your web browser and type the following URL into the address bar:
 - a. <https://va.train.org>
2. Press **9bhf** to load the **TRAIN**Virginia home page. See below.



Step 2

Locating the “Create Account” button

1. Once the **TRAIN**Virginia home page loads, click on the “*Create Account*” button.



Step 3

Read and agree to policies

1. Make sure to review all the **HF 5-B** Virginia policies.
2. When you are finished check the box that says, "I agree to these TRAIN policies" and click the next button.

The screenshot shows the TRAIN Virginia registration interface. At the top, there's a header with the Virginia Department of Health logo and a navigation bar with links: Course Search, Help, Core Competencies, and About This Site. Below the header, a message states: "Please read the following TRAIN policies carefully. If you agree to these policies, check the box below to continue with the registration. Note: You must agree to these policies to be able to access the TRAIN website." A list of policies is provided: I. General Policies and Liability Terms, II. Confidentiality Statement, III. Learner Rights and Responsibilities, IV. Course Provider Rights and Responsibilities, and V. Definitions. A red box highlights the checkbox labeled "I agree to these TRAIN policies*" which is checked. A red arrow points from this checkbox to the "Next" button in a larger box that also contains a "Cancel" button. A mouse cursor is shown clicking the "Next" button. At the bottom right, there is a copyright notice: "© PHF 2003-2007 - Confidentiality Statement".

Step 4

Beginning the registration process

1. Complete all the required fields.
 - a. All required fields are located on the left hand side of the screen and are marked with a red asterisk.
2. The Office suggests that you fill in the optional fields, however this information is not required to start an account.
3. Once you have finished, click on the next button.

The screenshot displays the registration form on the TRAIN Virginia website. The form is divided into two main sections: "Required Fields:" on the left and "Optional Fields:" on the right. The "Required Fields" section includes: Login Name:*, Password:*, Confirm Password:*, First Name:*, Last Name:*, Title:*, Telephone (daytime):*, Email:*, Confirm Email:*, Organization name:*, and Department / Division:*. The "Optional Fields" section includes: Middle Name:, Telephone (evening):, Daytime Extension:, Pager:, Fax:, Mobile:*, and Section:*. A red box highlights the "Telephone (daytime):*" field, and a red arrow points to it from a text box that says "You must fill in all fields marked with a red asterisk." Another red asterisk is visible next to the "Mobile:" field. At the bottom left, there is a "Country:" dropdown menu set to "United States". At the bottom right, there is a checkbox labeled "I would like to receive notifications about".

Organization name: *

Department / Division: *

Address 1: *

City / Township / Town: *

Zip code / Postal code: *

Country: *

State / Territory: *


County: *

Please choose your secret question and provide a ONE WORD answer.
You will be asked this question if you forget your password:

Question: *

Answer: *

☐ I would like to receive notifications about



© PHF 2003-2007 - Confidentiality Statement

Step 5

Completing the TRAINVirginia registration process

1. Select **"Virginia Certified EMS Provider"** in the left drop down menu.
 - a. **This step is very IMPORTANT in order to ensure your CE credit is properly recorded.**

Department of Health
Virginia

PHF
Public Health Foundation

Welcome
Monday, 6/11/2007

Course Search Help Core Competencies About This Site

Please select from the dropdown menus below your location, agency and/or job role as appropriate.

Select Job Role
 Select Job Role
 Not a Virginia Certified EMS Provider
 Virginia Certified EMS Provider

Select Region

Select Agency

© PHF 2003-2007 - Confidentiality Statement

2. Select the city or county in which you reside.

The screenshot shows the RAIN Virginia website interface. At the top, there is a header with the Virginia Department of Health logo, the PHF logo, and a 'Welcome Guest! | Login' link. Below the header is a navigation bar with links: Home, Course Search, Help, Core Competencies, and About This Site. The main content area contains a form with the instruction: 'Please select from the dropdown menus below your location, agency and/or job role as appropriate.' The form has three dropdown menus: 'Virginia Certified EMS Provider', 'Select Region', and 'Select Agency'. The 'Select Region' dropdown is open, showing a list of regions including Chesterfield, Crater, Cumberland Plateau, Eastern Shore, Fairfax, Hampton, Hanover, Henrico, Lenowisco, Lord Fairfax, Loudoun, Mount Rogers, New River, Norfolk, Peninsula, Piedmont, Pittsylvania / Danville, Portsmouth, Prince William, Rappahannock, Rappahannock / Rapidan, Richmond, Roanoke, Southside, Thomas Jefferson, Three Rivers, VDH Central Office, Virginia Beach, West Piedmont, and Western Tidewater. A red rectangle highlights the 'Select Region' dropdown menu. Below the dropdowns are 'Back' and 'Next' buttons. The footer includes a copyright notice: '© PHF 2003-07'.

3. Select "EMS" in the right drop down menu.

The screenshot shows the RAIN Virginia website interface. At the top, there is a header with the Virginia Department of Health logo, the PHF logo, and a 'Welcome' link. Below the header is a navigation bar with links: Course Search, Help, Core Competencies, and About This Site. The main content area contains a form with the instruction: 'Please select from the dropdown menus below your location, agency and/or job role as appropriate.' The form has three dropdown menus: 'Virginia Certified EMS Provider', 'Richmond', and 'Richmond City'. The 'Richmond City' dropdown is open, showing a list of agencies including EMS, Select Agency, Department of Health, Firefighter, Hospital, Law Enforcement, Local Government Agency, Other, Other Health Care Provider, Other Virginia State Agency, Volunteer Agency, and Water Programs. A red rectangle highlights the 'Richmond City' dropdown menu. Below the dropdowns are 'Back' and 'Next' buttons. The footer includes a copyright notice: '© PHF 2003-2007 - Confidentiality Statement'.

4. After you have made your selections in drop down menus, click the next button.

The screenshot shows the PHF (Public Health Foundation) training registration interface. At the top, there is a banner with the Virginia Department of Health logo and the PHF logo. Below the banner is a navigation bar with links: Course Search, Help, Core Competencies, and About This Site. The main content area contains a form with the instruction: "Please select from the dropdown menus below your location, agency and/or job role as appropriate." The form has three dropdown menus: "Virginia Certified EMS Provider", "Richmond", and "EMS". Below these is a fourth dropdown menu labeled "Richmond City". At the bottom of the form are "Back" and "Next" buttons. A mouse cursor is pointing at the "Next" button. The footer of the page reads "© PHF 2003-2007 - Confidentiality Statement".

5. Check the “Are you a member of the Medical Reserve Corps (MRC)” box **ONLY** if it applies to you. Then click the next button.

The screenshot shows the PHF training registration interface, specifically the section for Medical Reserve Corps (MRC) membership. The banner at the top is the same as in the previous screenshot. The navigation bar includes a "Home" link. The main content area contains the question: "Are you a member of the Medical Reserve Corps (MRC)?". Below the question are two radio buttons: "Yes" and "No". A red arrow points to the "Yes" radio button. Below the radio buttons are "Back" and "Next" buttons. A mouse cursor is pointing at the "Next" button. The footer of the page reads "© PHF 2003-".

6. Check up to three (3) Professional Roles boxes that best match your profession, and select a specialization where available. Click next after you have completed this step.

Department of Health

Virginia

PHF

Public Health Foundation

Welcome Guest! |

Monday, October 15

Course Search

Help

Core Competencies

About This Site

Please take a minute to review all roles before making your selection.

Please select up to three (3) Professional Roles that best match your profession, and select Specialization where available. If the "Other" option is selected, please enter specialization.

Professional Role	Value
<input type="checkbox"/> Allied Health Professional	--Select--
<input type="checkbox"/> Administrator / Director / Manager	
<input type="checkbox"/> Administrative Support Staff	
<input type="checkbox"/> Animal Control Specialist / Veterinarian	
<input type="checkbox"/> Biostatistician	
<input type="checkbox"/> Childcare Provider	
<input type="checkbox"/> Communicable Disease / Infection Control Staff	
<input type="checkbox"/> Computer / Information Systems Specialist	
<input type="checkbox"/> Dental Professional	--Select--
<input checked="" type="checkbox"/> Emergency Responder	--Select--
<input type="checkbox"/> Environmental Health Professional	--Select--
<input type="checkbox"/> Epidemiologist / Surveillance Staff	
<input type="checkbox"/> Food Services / Facilities Management Staff / Housekeeper	
<input type="checkbox"/> Government Official	--Select--
<input checked="" type="checkbox"/> Health Educator	

☐ Mental and Behavioral Health Professional

--Select--

☐ Nurse

--Select--

☐ Occupational Health and Safety Personnel

☐ Outreach / Field Worker

☐ Pharmacy Professional

--Select--

☐ Physician

--Select--

☐ Non-Physician Clinician

--Select--

☐ Policy / Planner

☐ Program Specialist

☐ Public Health Official

☐ Public Relations / Media Specialist

☐ Researcher / Analyst

☐ Student

☐ Teacher / Faculty

☒ Volunteer

☐ Other (specify)

Back

Next

© PHF 2003-2007 - Confidentiality Statement

Revised 12-28-2007

Page 7 of 10

7. Choose **“Healthcare Services”** and click **BYI** hto continue.

Department of Health
Virginia

PHF
Public Health Foundation

Welcome Guest

Monday, October

Course Search Help Core Competencies About This Site

Please select up to three (3) Work Settings that best fit your work environment. Choose Subcategories where applicable.

Work Settings	Value
<input type="checkbox"/> Academic / Educational Institution	--Select--
<input type="checkbox"/> Official Public Health Agencies	--Select--
<input type="checkbox"/> Military	
<input type="checkbox"/> Other Government Agencies (except Military)	
<input checked="" type="checkbox"/> Healthcare Services	--Select--
<input type="checkbox"/> Indian Health Service	
<input type="checkbox"/> Tribal Health Sites	
<input type="checkbox"/> Non-Profit Organization (except Healthcare)	
<input type="checkbox"/> Private Industry (except Healthcare)	
<input type="checkbox"/> Other (specify)	

Back Next

© PHF 2003-2007 - Confidentiality Statement

8. Select the appropriate demographic information. Remember this information is optional. When you are finished, select the Next button.

Department of Health
Virginia

PHF
Public Health Foundation

Course Search Help Core Competencies About This Site

Please select appropriate demographic information (optional).

Demographic Information	Value
Education level (highest attained)	--Select--
Sex	--Select--
Ethnicity	--Select--
Race	--Select--
Birth Date	<input type="text"/> (Format: MM/DD/YYYY)
Primary Language	--Select--
Secondary Language	--Select--

Back Next



© PHF 2003-2007 - Confidentiality Statement


9. Under “**Virginia Attributes**”, answer the mandatory question # 1, however DO NOT COMPLETE any other ITEMS and select the next button.

Department of Health
PHF
Public Health Foundation

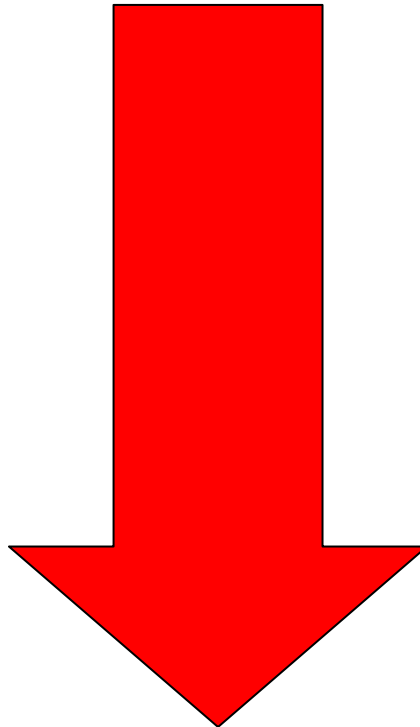
Course Search Help Core Competencies About This Site

Please enter the appropriate information (optional).

Virginia Attributes	Value
Current VDH Employee *	No  
Professional Association Number	<input type="text"/>
Race / Ethnicity	--Select--
Manager / Supervisor	<input type="checkbox"/>

Back Next 

© PHF 2003-2007 - Confidentiality Statement





The following screens **MUST** be completed correctly in order for your CE to be posted to your records. Please pay special attention to your keying in this section.

- Under Virginia EMS Attributes fill in **BOTH** fields marked with a red asterisk. Be sure that you fill in your **certification number** and **training program** level information correctly, or you will not receive CE credit for courses that you take.

CE credit is available from the Virginia Office of EMS for the "Virginia Certified EMS Provider" group only.

Remember, it is your responsibility as a Virginia EMS provider to assure that your Virginia certification number is entered correctly in order to receive CE credit.

This program will **ONLY ACCEPT** your certification number, NOT your social security number. (Correct Example: E123456789)

The Office of EMS is not responsible for incorrect information which occurs during your TRAINVirginia registration process and can not research missing CE credits due to failure from inaccurately setting up your TRAINVirginia account. Please assure that your certification number and level are correctly entered prior to leaving this page.

Virginia EMS Attributes	Value
Certification Number *	B123456789
Training Program Level *	--Select--

Back Next

© PHF 2003-2007

- You should now see your name and confirmation that your new account has been created.
- Congratulations in finishing your account setup.
- Click the Continue button to move on and register for courses.

Hello, Jon

Your NEW ACCOUNT has been created.

Click on Continue button to register for your course.

Continue

© PHF 2003-2007 - Confidentiality Statement